

NEWYORK STATE HOUSING FINANCE AGENCY

SHORT FORM APPLICATION REQUIREMENTS FOR MEDICAID REDESIGN TEAM "MRT" HOUSING CAPITAL PROGRAM

APPLICATION CHECKLIST

I. **Sponsor/Principals of Borrower**

- Project Application.
- Omnibus Certification (HFA Form 1*).
- Credit Report Information (HFA Form 2).
- Authorization to Release Information (HFA Form 3).

II. **Project Information**

- Project Narrative.
- Evidence of Site Control.
- Evidence of Service Award
- Federal, State and Local Government Approvals Required and/or Received.

Project Financial Analysis

- Annual Income and Expense Projections (HFA Form 5).
- Development/ Rehabilitation Cost Breakdown (HFA Form 6).
- Sources and Uses of Funds Schedule and Proforma (HFA Form 7).

III. **Subordinate Financing**

- Letter of Intent/Term Sheet from Subordinate Lenders and/or Grant Providers, if applicable and if available.

*All HFA Forms can be downloaded from the Agency's website: nyshcr.org